



ANTE-NATAL CARE

Facilitator Guide for SHG Meetings



Deendayal Antyodaya Yojana - National Rural Livelihoods Mission (DAY-NRLM)

Ministry of Rural Development, Government of India

Dear Facilitator

This facilitator guide on **Ante-Natal Care** is designed to help all facilitators under State Rural Livelihood Missions (SRLMs) in rolling out the Flipbook and disseminating key messages within the SHG groups and other community cadres. ANC session is part of a training package on Food, Nutrition, Health and WASH (FNHW) consisting of Flip books, Facilitator guides, Posters, Counselling Cards and Stickers.

The objective of this training on Ante-Natal Care is to empower SRLM staff, cadres and community at large with the knowledge and key behaviors to improve the health and nutrition practices for pregnant women. This knowledge may consequently help to adopt better practices that will improve the nutritional and health status of pregnant women and understand ket practices to follow in post natal period. We all know that better health and nutrition results in higher productivity leading to reduction in poverty and improvement in quality of life.

It should be kept in mind that this orientation package, although meant for SHG women should serve as reference material for the entire family. Information provided under each session through flipbooks and this guide should be seen as collective learning for the family, and each member of the family need to play their part to ensure that the messages are adopted by them in everyday lives.

The responsibility of getting these behaviors imbibed does not lie with women only, the men/husbands/older boys in the family need to ensure making arrangements for whatever is required to follow these practices on FNHW.

Objectives

After going through the module, the facilitator will be able to:

- Explain the significance of early registration of pregnancy, importance of antenatal care and birth preparedness
- Explain the significance of care during the postnatal period for both the mother and newborn

Initiate the Session

It is very important that in this session you do not allow the participants to perpetuate negative cultural taboos and myths. More importantly, ensure that participants truly understand the necessity and importance of antenatal checkups along with points to remember in preparation for safe delivery.

Maternal death (Mortality) and illness (Morbidity) Maternal mortality is defined as death of a pregnant woman occurring during her pregnancy or during the first 42 days after pregnancy. The five main medical causes of maternal deaths are the same for women all over the world. These are: Haemorrhage, Sepsis, Hypertensive disorders, Obstructed labour, Unsafe abortion.

To avert maternal deaths due to these causes, it is paramount to provide essential care to for the pregnant women during antenatal and postnatal periods.

Case Study

Anita is five months pregnant and is not part of any women's/social group. Since the news of her pregnancy, her husband started taking care of her and started bringing her new food items from the market and participate in few of the household chores. She is yet due to her first antenatal checkup as her husband has restricted her to go outside the home. Upon knowing about Anita's pregnancy, ANM/AWW tried to contact her but they refused to divulge any details about the pregnancy. They both feel that Anita is doing fine all this while and will do so all throughout her pregnancy without anybody's advice. Answer the following questions:

- What do you think, whether Anita is being given adequate antenatal care?
- What would you suggest to her husband to ensure better care of her pregnant wife?
- What role ANM/ASHA/AWW can have here?

Note: Do not explain any answer to the participants here, just listen what they have to say.

Step 1:

Initiate the session with a discussion on and significant practices of antenatal care and checkpoints given below. The key points to be discussed may be written on the white board and may be projected in case of virtual training.

- Registration of pregnancy
- Ante-Natal Check-ups
- Preparation for Delivery





Step 2:

Ask all the participants to share their understanding on the registration of pregnancy and discuss the fact that most women do not register on time and usually pregnancy is not known to others till almost the first trimester is over. Inform the group that registration should be done as soon as pregnancy is confirmed so that the services can be availed timely.



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Registration of pregnancy

 When the pregnancy is confirmed go to the ANM/ Anganwadi Centre to register your pregnancy, and go to the nearby health center. The ANM or Nurse will write the pregnant women's name in the register and will issue the Mother Child Protection

(MCP) Card free of cost. All the information related to pregnancy, childbirth, specialized child care upto two years of age and immunization are recorded in the MCP card.

MCP card should be kept safely and to be brought during every visit.

Step 3:

Discuss with all the participants to share their understanding on the benefits of mother and child protection card and highlight the discussion points writing on a paper/white board.

Benefits of Mother & Child Protection Card

- The mother and child protection card will have the registered name of the pregnant women's and all information regarding test and vaccinations done for her unborn children till 5 years.
- Other important information about the danger symptoms, if any or other pregnancy related issues are also noted on the card.
- Similarly, necessary information about the development of the child is also recorded on this card.
- Pay attention and note that the information on the card is entered each time after a check up, investigation or vaccination of yours or your child.

All this information when timely and completely entered in the card provides details to any person regarding the health status of mother and child.



Step 4:

Discuss with all the participants to share their understanding on the benefits of minimum 4 check-ups during pregnancy and whether they went for these checkups during pregnancy. Also ask the group if they have faced any resistance from family or others if getting these ANC done.

About the 4 antenatal check-ups

Every woman is recommended for minimum 4 check-ups since her identification of pregnancy till her delivery.

- First ANC: Within three months, immediately after the pregnancy is detected the first check is done after registering the pregnant women's name in the register.
- **Second ANC:** The second checkup should take place between the 4th to 6th months.
- Third ANC: The third check-up Should take place between the 7th to 8th months.
- Fourth ANC: In the 9th month check-ups are mandatory for the pregnant women.

Regular antenatal check-ups are helpful in identification of danger signs during pregnancy that can be acted upon in time to avoid any untoward event. Some of the danger signs are:

- Vaginal bleeding.
- No movement of baby in womb.
- Convulsion/fit.
- Anaemia.

Any pregnant women who has suffered either of the above mentioned danger signs during previous pregnancy, must be more careful this time.



Points to remember

- Antenatal services are made available in the Anganwadi centre on the (VHSND) health check-ups and vaccination Days.
- Pregnant women can also avail the services from the nearby primary health centres.
- Husbands should accompany their wives for these check-ups and participate in consultation.

Step 5:

• Discuss with all the participants to share their understanding on the important services and information provided during antenatal check-ups.

Essential services provided during antenatal check-ups

- Physical examination: The abdomen, eyes, tongue, nails, teeth and feet are examined.
- Blood Pressure is monitored every time. Pregnant women should be careful about their blood pressure as well as blood sugar levels. High level of either or both may lead to complications.
- Weight: The weight of the pregnant woman is taken at every check-up. It is advised that the pregnant woman should gain at least 10 to 12 kilograms during pregnancy period.
- T.T. Vaccines: Two doses of T.T. are given during pregnancy. The first one is when pregnancy is detected and the second dose is given after a month of first dose.
- Blood and urine tests are done, so that the dangers of pregnancy, if any, can be detected at the right time.
- Ultrasound should be undertaken once between 18 to 19 weeks of pregnancy.
- **IFA and Calcium:** A pregnant woman must take 180 iron pills and 360 calcium tablets duringpregnancy, starting from the fourth month of pregnancy.
- De-worming: A pregnant woman must take one tablet of albendazole in the second trimester for deworming.
- Counselling on diet: A pregnant woman should eat at least one extra meal in the day and maintain diet diversity; should consume 5 of 10 recommended food groups.













Step 6:

Discuss with all the participants to share their understanding on the important benefits of antenatal check-ups for a healthy mother and child and highlight the discussion points writing on a paper/white board.

Benefits of Antenatal check-ups: Healthy mother and healthy child

- Physical examination provides timely information about the health of both mother and child.
- Blood Pressure (BP) is checked, so that dangers like seizures etc. can be detected at the right time.

- Appropriate weight gain of the pregnant woman reflects adequate development of the baby The baby may be born weak due to the mother not gaining as much weight as it should.
- The TT vaccine prevents both the mother and the child from the risk of getting tetanus.
- Taking IFA and Calcium in recommended quantities helps fetal brain development and reduces the risk of anaemia in the pregnant woman and problems during delivery.
- Consuming the right amount of nutritious food during pregnancy keeps both the mother and child in good health.

Step 7:

Discuss with all the participants to share their understanding on the important points to keep in mind while preparing for the delivery and inform them that it is essential to do certain preparations before the delivery is due so that there is no last minute rush and the family is prepared even if there is an emergency..

Preparation for the delivery

- Identify the hospital for delivery and keep contact details prior to the expected date of delivery.
- Identify person/s who can donate blood and keep their contacts, in case there is a need during delivery.
- Keep a bag ready for the hospital with clean clothes, necessary items and copy of key contact numbers.
- Keep the numbers of the ambulance ready for call.
- Keep the number of the ANM/ASHA ready for call.
- Keep some money ready for meeting the expenses.
- Be sure to check with your doctor in the hospital before the expected date of delivery.
- For any reason or emergency, if you have to get the delivery done at home, keep ready:
 - Contact number of trained nurse.
 - Clean space for delivery at home.
 - Clean, cotton and dry cloth.
 - New blade.
 - New thread.
 - New soap.











The three delays

Once a complication occurs, the key to saving a woman's life is to get her adequate care in time. The delays leading to death can be divided into:

Delay 1: Delay in deciding to seek care;

Delay 2: Delay in reaching the health facility, and

Delay 3: Delay in receiving treatment at the health facility.

*Adequate birth preparedness is very important to avoid any unnecessary delay in seeking care when the time comes.

Step 8:

Ask the participants who had recently become a mother or experienced in her family to share her understanding on the care during the postnatal period and highlight the discussion points writing on a white board.

Postnatal care

- Remember to breast feed the child within one hour of birth.
- Discharge from the hospital should be at least 48 hours after delivery.
- Both the Mother and child must be thoroughly examined before being discharged.
- Mother should take special care of her nutrition and eat extra amount of food after delivery.
- Mother should take adequate rest for 42 days, not lift heavy weight, rest for at least 2 hours in the day and eat well. Remember that no type of food is prohibited for a post natal woman.
- The new mother should take iron/IFA and calcium tablet regularly.
- The newborn should not be given anything other than breast milk for six months.
- Always wash hands with soap before touching a newborn.
- The couple should discuss and adopt a suitable family planning method.
- Contact your ANM or health care provider in case of any problem.

Highlight the role of husband and family during this period and that all these points above should be ensured after the baby id born. Whoever is accompanying the woman in the hospital should also ensure that proper checkup of the new mother and new born is done before discharge.





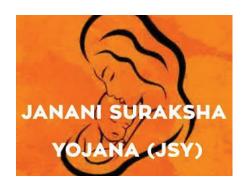




The first 48 hours following delivery are the most critical in the entire postpartum period. Most of the important complications of the postpartum period which can lead to maternal death occur during these 48 hours. Hence, a woman who has just delivered needs to be closely monitored during the first 48 hours.







Various postnatal benefits are available under the "Janani Shishu Suraksha Karyakram (JSSK)", Janani Suraksha Yojana (JSY) and Pradhan Mantri Matru Vandana Yojana (PMMVY) for mother and child. Make sure to link the women to these schemes.

Role of Self Help Group

- ▶ The members of the group should ensure that all pregnant women in their families are registered in the Anganwadi center and all their ante-natal checkups are being done.
- Make sure that the husbands are aware of information on the MCP Card and they ensure all preparations for safe delivery.
- ▶ Help all pregnant women in the group and their family prepare for delivery by:
 - Informing and helping them in identifying the hospital, identifying and talking to the person who can donate blood if needed, keep ASHA's number, ambulance number and save money for delivery expenses.
 - Keep the number of the trained nurse and clean cloth, new blade, new thread and new soap ready in a bag.

Note: The Self Help Group should be ready to support those members who face problems or find it difficult to convey these messages and convince their families.

Session concludes: End the session by revisiting the questions from the case study and their answers. Thank the participants and close.



The Food, Nutrition, Health and WASH (FNHW) Toolkit has been developed by the National Mission Management Unit (NMMU) with support from Technical Assistance agencies—TA- NRLM (PCI) and inputs from ROSHNI—Centre of Women Collectives led Social Action, National Institute of Rural Development (NIRD), State Institutes of Rural Development (SIRDs), National Resource Persons (NRPs), State Rural Livelihood Missions (SRLMs) of Bihar, Chhattisgarh, Jharkhand, Odisha, Uttar Pradesh, Andhra Pradesh, Telangana and Maharashtra, JEEViKA Technical Support Program—Project Concern International (JTSP—PCI) and UNICEF state teams from Odisha, Bihar and Chhattisgarh.

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